

Application Data Sheet

APPLICATION INFORMATION

Application Number::

Filing Date:: 2/2/04

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks:

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: IMPROVED ECMP SYSTEM

Attorney Docket Number:: 100172

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?:: No

Latin Name::

Variety denomination name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

APPLICANT INFORMATION

Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Vlasta
Middle Name::
Family Name:: Brusic
Name Suffix::
City of Residence:: Geneva
State or Prov. of Residence:: IL
Country of Residence:: US
Street of mailing address:: 721 Easton Avenue
City of mailing address:: Geneva
State or Province of mailing address:: IL
Country of mailing address:: US
Postal or Zip Code of mailing address:: 60134

Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Boris
Middle Name:: D.
Family Name:: Cahan
Name Suffix::
City of Residence:: Euclid
State or Prov. of Residence:: OH
Country of Residence:: US
Street of mailing address:: 26151 Lakeshore Blvd., Apt. 1921
City of mailing address:: Euclid
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44132

CORRESPONDENCE INFORMATION

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REPRESENTATIVE INFORMATION

Representative Customer Number One:: 29050
Representative Customer Number Two:: 23460

Representative Designation:: Registration Number:: Representative Name::

DOMESTIC PRIORITY INFORMATION

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

FOREIGN APPLICATION INFORMATION

Country:: Application Number:: Filing Date:: Priority Claimed

ASSIGNEE INFORMATION

Assignee name:: Cabot Microelectronics Corporation

Street of mailing address:: 870 Commons Drive

City of mailing address:: Aurora

State or Province of
mailing address:: Illinois

Country of mailing
address:: US

Postal or Zip Code of
mailing address:: 60504